CMS: SEP-1 Repeat Volume Status and Tissue Perfusion Assessment

Definition: Documentation indicating that a repeat volume status and tissue perfusion assessment was performed to assess the patient's response to the administration of crystalloid fluids.

Timing: Must be completed within 6 hours after onset of Septic Shock as determined by one of the following:

- Severe Sepsis + Initial Hypotension
- Severe Sepsis + Lactic Acid >4
- Provider documentation of Septic Shock

A repeat volume status and tissue perfusion assessment may consist of any of the following:

- Physician/APN/PA documentation attesting to performing or completing a physical examination, perfusion (re-perfusion) assessment, sepsis (severe sepsis or septic shock) focused exam, or systems review.
  Examples of Physician/APN/PA documentation that is acceptable:
  - "I did the Sepsis reassessment"
  - Flowsheet question: "Sepsis focused exam performed?" and selection of "Yes"
  - "Review of systems completed"
- Physician/APN/PA documentation indicating they performed or completed a review of at least five of the following eight parameters. Reference to the parameters must be made in physician/APN/PA documentation. Physician/APN/PA documentation does not need to reference all parameters within the same note.

  1. *Arterial* Oxygen Saturation
  2. Capillary Refill
  3. Cardiopulmonary Assessment
  4. Peripheral Pulses
  5. Shock Index
  6. Skin color or Condition
  7. Urine output (specific volume not required)
  8. Vital Signs

- Documentation demonstrating one of the following was measured or performed. This documentation can be met by physician/APN/PA or non-physician/APN/PA documentation of performance of the test, a result or value. Physician/APN/PA attestation to having reviewed the test is acceptable.

  1. CVP
  2. Central Venous Oxygen Saturation
  3. Echocardiogram

Crystalloid Fluids:

30ml/kg

- The specified time frame for abstraction of crystalloid fluids is within six hours prior through three hours after either of the following trigger events. If both are present, use the earliest trigger event within the specified time frame.
  - Initial Hypotension Date and Time
  - Septic Shock Presentation Date and Time
- Crystalloid fluid volumes ordered that are equivalent to 30 mL/kg or a lesser volume with a reason for the lesser volume specifically documented by the physician/APN/PA are the target ordered volume.
- A physician/APN/PA order for a volume of crystalloid fluids that is within 10% less than 30 mL/kg is acceptable for the target ordered volume. Documentation of a reason for a volume that is within 10% less than 30 mL/kg is not required.

- **A Provider order for <30 ml/kg of crystalloid fluids is acceptable if the Provider has documented in a *single note* the volume to be administered (can be specific volume or based on Ideal Body Weight if IBW or "obesity" is documented in the note), *AND* a reason for ordering a volume <30ml/kg (Ex: concern for fluid overload).**
- **Only fluids that are ordered and administered at a rate >125ml/hr will count toward the required fluid volume.**

Covid-19

Documentation of COVID-19 or coronavirus qualified with a term synonymous with "possible, probable, likely, or suspected" is acceptable. These patients, as in the past, will be excluded from the Sepsis Population.

Comfort Care

Before Comfort Care can be accepted, Provider documentation must include one of the following:

1. Comfort measures only recommended
2. Order for consultation or evaluation by a hospice care service
3. Pt./Pt. Rep request for comfort measures only
4. Plan for comfort measures only
5. Referral to Hospice care service

Unacceptable contexts: "Discussion of…."; "Considering…."